Harnett County Central Permitting
PO Box 65 Lillington, NC 27546 - Ph: 910-893-7525 - Fx: 910-893-2793 - www.harnett.org/permits Certification of Work Performed By Owner/Contractor (Individual Trade Application)

Owner (s) of Structure: SickAnd H Moun	Phone: 910 797 7750
Owner (s) Mailing Address: 406 STewart Town	
Lillaston NC	
Land Owner Name (s): 5 whe	
Construction or Site Address: School	
PIN # Parcel #	
Job Cost:Description of Work to be done	
rickmoore. e arm services	inc. com
Mechanical: New Unit With Ductwork New Unit Without D	Ouctwork Gas Piping Other
Electrical*: 200 Amp <200 Amp Service Change  * For Progress Energy customers we need the pre-	_ Service Reconnect Other emise number
Plumbing: Water/Sewer Tap <u>K</u> Number of Baths	Water Heater
Specific Directions to Job from Lillington:	
Subdivision:	Lot#:
will provide the	labor on this structure.
(Contractors Name)	(Trade)
am the building owner or my NC state license number is	, which entitles me to
perform such work on the above structure legally. All work shall	comply with the State Building Code and all
other applicable State and local laws, ordinances and regulations	S.
OWNer	
Contractor's Company Name	Telephone
Address	Email Address
License #	
- / / //8//	Date: 11-23-2021

the listed property for 12 months after completion of the listed work.

\*Company name, address, & phone must match information on license